

FORM TO BE USED BY A PRISONER FILING AN  
APPLICATION TO PROCEED IN FORMA PAUPERIS  
IN A 42 U.S.C. § 1983 CIVIL RIGHTS ACTION  
IN THE UNITED STATES DISTRICT COURT  
FOR THE DISTRICT OF DELAWARE

Gbeke m. Awala

I. CAPTION

(Enter the full name of plaintiff or  
plaintiffs)

07 - 110

v.

U.S. Attorneys, Office District of Delaware et al.

(Enter the full name of defendant or  
defendants)

Instructions:

The caption of this application should be **identical** to the caption of the complaint. A separate application must be completed by each plaintiff listed in the caption. Show your full name in the first line of the declaration below. Provide all information requested.

II. DECLARATION

I, (your name) Gbeke m. Awala, declare that I am the plaintiff in the above-captioned 42 U.S.C. § 1983 civil rights action, and that I am entitled to proceed in forma pauperis pursuant to 28 U.S.C. § 1915 because of my inability to prepay the full fee to file this action or give security therefor. I understand that the granting of in forma pauperis status does not waive payment of the full filing fee.

In further support of this application, I provide the following information:

1. Do you presently have prison employment? yes ( ) no ( ☒ )
2. If you are not employed do you have other income? yes ( ) no ( ☒ )
3. If "yes" to either of above, state source of monthly income and amount.

source \_\_\_\_\_ amount \_\_\_\_\_

4. If "no," state date and place of last employment and amount of monthly income.

date and place \_\_\_\_\_ amount \_\_\_\_\_

5. Do you have money in a prison account? yes ☒ no ( ) amount \$ 3.00
6. Do you have money in a bank account? yes ( ) no ( ☒ ) amount \_\_\_\_\_

7. Do you own or have an interest in valuable property such as an automobile, real estate, stocks, or bonds? yes ( ) no ( ☒ )

If "yes," describe property \_\_\_\_\_ value \_\_\_\_\_

FILED  
2007 FEB 22 PM 4:39  
U.S. DISTRICT COURT  
DISTRICT OF DELAWARE

8. List the persons who depend on you for support, state their relationship to you, and how much you contribute toward their support.

None

9. State whether you have received within the past 12 months any money from any of the following sources:

- a. Business, profession or other form of self-employment yes ( ) no ( ☒ )  
b. Rent payments, interest or dividends yes ( ) no ( ☒ )  
c. Pensions, annuities or life insurance payments yes ( ) no ( ☒ )  
d. Gifts or inheritances yes ( ) no ( ☒ )  
e. Any other sources yes ( ☒ ) no ( )

If the answer to any of the above is "yes," describe each source of money and state the amount received from each source during the past 12 months.

Student Pay

### III. DECLARATION AND SIGNATURE

I declare under penalty of perjury that the foregoing is true and correct.

  
\_\_\_\_\_  
SIGNATURE OF PLAINTIFF

2/11/07  
\_\_\_\_\_  
DATE

### IV. CERTIFICATION

#### Instructions:

Request that an appropriate prison official provide: 1) the information below concerning your inmate trust fund account balances; and 2) a certified copy of your inmate trust fund account statement showing all deposits and withdrawals for the prior six-month period.

I certify that the applicant named herein has the sum of \$ 3.00 on account to his credit at the MVCC institution where he is confined.

I further certify that during the last six months the applicant's average monthly account balance was \$ \_\_\_\_\_; and that the average monthly deposits during the during the last six months were \$ \_\_\_\_\_.

  
\_\_\_\_\_  
SIGNATURE AND TITLE OF AUTHORIZED OFFICIAL

2-10-7  
\_\_\_\_\_  
DATE